

| POSITION            | INITIALS   | ID NO.       | DATE           |
|---------------------|------------|--------------|----------------|
| FEE DETERMINATION   | <i>Smc</i> | <i>71002</i> | <i>7/20/99</i> |
| O.I.P.E. CLASSIFIER |            | <i>12</i>    | <i>7/26</i>    |
| FORMALITY REVIEW    | <i>ERW</i> | <i>70622</i> | <i>8-6-99</i>  |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 ..... Allowed      I ..... Interference  
 (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here